

# **Recreation Commission**

**Financial Assistance Program Policy** 

Scholarship@uptonma.gov

: January 2023

Upton Recreation assures that applicants will not be discriminated against on the basis of race, sex, religion, creed, color, national origin, disability, or age.

### **Application Guidelines**:

- All applicants must be current Upton residents at the time of submission of application
- All applications must be submitted within the guidelines laid out on the Town of Upton website. Any applications that do not follow the guidelines will not be considered
- All applications for financial assistance will be kept confidential by the scholarship committee
- Applications will be considered on a "first come first serve" basis
- Not all Recreation Department programs are eligible for financial assistance
- Applicants must meet one of the criteria listed below to be eligible to apply
- Email applications and required documentation to Scholarship@uptonma.gov

#### Eligibility (must meet at least **one** of the following criteria):

- Enrolled in the free/reduced lunch program at time of submission of application
- Enrolled in the SNAP program at time of submission of application
- Household income at time of submission of application falls within the following thresholds:
   \* Household income can be submitted as first page of the most recent federal tax return or past three months' worth of bank statements

% of aid family may receive up to:		80%	100%
Family Size:	1	\$25,142	\$17,667
	2	\$33,874	\$23,803
	3	\$42,606	\$29,939
	4	\$51,338	\$36,075
	5	\$60,070	\$42,211
	6	\$68,802	\$48,347
	7	\$77,534	\$54,483
	8	\$86,266	\$60,619
	9	\$94,998	\$66,755
	10	\$103,730	\$72,891

\$8,732

\$6,136

\*Data pulled from:

https://www.fns.usda.gov/cn/fr-021622

For each additional family member add:



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### THIS DOCUMENT IS CONFIDENTIAL

Any and all records, including names of families/children, related to requests for financial assistance are  $\underline{EXEMPT}$  from the MA Public Records Laws per M.G.L. c. 4,  $\S$  7(26)(a)&(c) and M.G.L. c. 214,  $\S$  1B and is not to be released.

## **Application For Financial Assistance**

\*If you are requesting assistance for multiple children, you may list them all on one form.

Please attach separate documentation for each as required.

Child's Legal Name:					Date:		
Paren	t/Guardian	ı's Legal Name	:				
Addre	ess:						
	(#)	(Street)	(Town)	(State)	(Zip)		
Phone	e:		Email	l:			
Select	Week 1 Week 2 Week 3 Week 4 Week 5 Week 6 Week 7 Week 8 Week 9	eek's child will	be attending:	dates for extrips, etc:	l single days child wi	/afternoon, field	
I certify	y (promise)	under penalty of p income level of m equest supporting	from the past erjury that the foregoing by household falls within	three months.  g is true and correct the stated guidelineare that if I purpos	al tax return or bands.  That all information on thes. I understand that the ely give false information State and Federal laws.	this application is Upton Scholarship	
					Date:		
Full L	egal Nam	e:			_		

Last Updated: January 2023